# L18000049529

(Requestor's Name)
(Address)
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(Business Entity Name)
(Document Number)
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SECRETARY OF STATE FALLAHASSEE, FLORIDA

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# **COVER LETTER**

TO: Registratio Division of	n Section Corporations
PALMO SUBJECT:	CYPRESS, LLC
	Name of Limited Liability Company
The enclosed Article	s of Amendment and fee(s) are submitted for filing.
Please return all corre	espondence concerning this matter to the following:
	CHASE MAYHUGH
	Name of Person
	MAYHUGH COMMERCIAL MANAGEMENT, LLC
	Firm/Company
	13690 EAGLE RIDGE DR.
	Address
	FORT MYERS, FL 33912
	City/State and Zip Code
	CHASE@MAYHUGHREALTY.COM  E-mail address: (to be used for future annual report notification)
For further information	on concerning this matter, please call:
CHASE MAYHUGE	1 239 278-4945 at ()
Naı	ne of Person Area Code Daytime Telephone Number
Enclosed is a check f	or the following amount:
■ \$25.00 Filing Fee	E □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

## STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PALMCYPRESS, LLC			
(Name of the Limi	ited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	<del></del>
The Articles of Organization for this Limited L. Florida document number L18000049529	Liability Company	were filed on 2/23/2018	and assigned
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name of	of the limited liab	ility company here:	
The new name must be distinguishable and contain the	words "Limited Liabil	ity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		SECH ALLI
(Principal office address MUST BE A STREI	ET ADDRESS)		APR 2
			ARY LARY LARY LARY LARY LARY LARY LARY L
Enter new mailing address, if applicable:		13690 EAGLE RIDGE DR.	OF STORY OF
(Mailing address MAY BE A POST OFFICE	BOX)	FORT MYERS, FL 33912	O RIDA
B. If amending the registered agent and registered agent and/or the new registered of	-	· ·	nter the name of the new
Name of New Registered Agent:	MAYHUGH CO	OMMERCIAL MANAGEMENT, LI	.c
New Registered Office Address:	13690 EAGLE		
		Enter Florida street address	
	FORT MYERS	Florid	la 33912

### New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Chase Mayhugh
If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR =	Manager
AMBR =	<b>Authorized Member</b>
Title	Name

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	DEVKI ADI	6791 MOSSY GLEN DR.	Add
		FORT MYERS, FL 33908	■ Remove
			Change
	<del> </del>		□ Add
			□ Remove
		. <u></u>	☐ Change
			Add
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			Add
			Remove
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		<del></del>	□ Remove
			Change
	<del> </del>		Add
			□ Remove
			□ Change

Effective date, if other than the date of filing:  4/24/2018  (If an effective date, if other than the date of filing:  4/24/2018  (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant us 605.0207 (3)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.  the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  The 90th day after the record is filed.  Pathist Adi  Signature of a member or authorized representative of a member							
Effective date, if other than the date of filing:    4/24/2018							
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Ashish Adi			t not an ef	fective time,	at 12:01 a.m	n, on the earlie	r of:
	Dated APRIL 23	, 2018	·				
Signature of a member or authorized representative of a member		Ashish f					

Page 3 of 3

Filing Fee: \$25.00